

ISSUE SLIP STAPLE AREA (for additional cross references)

7-10-3      2-11-99

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	810	71058	2-2-99
O.I.P.E. CLASSIFIER	DN	32	2/5
FORMALITY REVIEW			

INDEX OF CLAIMS

..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
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